## 106000027396

(Requestor's Name)
•
(Address)
(Addiess)
(Address)
(C) - (C) - (T) - (T) (O)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
0.77.10.1
Certified Copies Certificates of Status
Outsid last at the state of the
Special Instructions to Filing Officer:
,

Office Use Only



200149078182

FILED 2009 MAY -8 AM 10: 49 SECRETARY OF STATE SECRETARY OF STATE

T. CLINE

MAY 1 1 2009

**EXAMINER** 

W39-17650



April 15, 2009

JENNIFER JONES P.O. BOX 164721 MIAMI, FL 33116

SUBJECT: A2 CONSTRUCTION, LLC

Ref. Number: L06000027396

We have received your document for A2 CONSTRUCTION, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 309A00012630

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	A2 CONSTRU	JCTION, LLC.		-	-
SUBJECT:		ited Liability Company)		•	+
	f Amendment and fee(s) are sub condence concerning this matter	_			
		JENNIFER JONES			
		(Name of Person)			
	ALLIED TA	ACTICAL & AMMUNITION, LLC.			
		(Firm/Company)		•	
PO BOX 164721					
	<del> </del>	(Address)		2009 SEC	
		MIAMI FL 33116		AET AET	
		(City/State and Zip Code)		-8 ARY SSE	1
For further information	concerning this matter, please c	all:		2009 MAY -8 AM 10: 49 SECRETARY OF STATE TALLAHASSEE, FLORID.	(
JENNIFER		at ( 786 ) 258-2288			
(Name	e of Person)	(Area Code & Daytime	Telephone Numbe	er)	
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	☑\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &	i)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions		

al

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A2 CONSTRU			
(Name of the Limited Liabili (A Florida	ty Company as it now app Limited Liability Company	ears on our records	.)
<b>,</b>			
The Articles of Organization for this Limited Liability	Company were filed on _	03/14/2006	and assigned
Florida document number L06000027396			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company l	nere:	
ALLIED TACTICAL & AMMUNITION, LLC.			1 2
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Con	npany," the designati	
E.E.C.			留るフ
Enter new principal offices address, if applicable:	·		SA
(Principal office address MUST BE A STREET ADD	ORESS)		me - m
			FS E
			E 4.9
Enter new mailing address, if applicable:			9 A
(Mailing address MAY BE A POST OFFICE BOX)			
			•
	<del> </del>		
B. If amending the registered agent and/or registered		n our records, <u>en</u>	ter the name of the new
registered agent and/or the new registered office ad	dress nere:		
Name of Nam Basistanad Agants			
Name of New Registered Agent:			
New Registered Office Address:		/D	
	(Enter Florida street address)		
		, Florid	
	(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JENNIFER JONES	13299 SW 124 ST MIAMI FL 33186	■ Add ■ Remove
MGR	PETER NEWTON-JOHN	13299 SW 124 ST MIAMI FL 33186	Add Remove
MGR	THOMAS AVELLO	10465 SW 112 ST MIAMI FL 33176	Add Remove
MGR	RUBEN ESPINOSA	13299 SW 124 ST MIAMI, FL 33186	SECTION TO THE PROPERTY OF THE
			SEY OF A
			Add Remove
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessor	ary.)
_			
Dated	5.3 08 Jetu 1	Yewton -	5309
		or authorized representative of a member ER NEWTON-JOHN or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00